

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services
- Complete items 3, 4a, and 4b
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: **960714**

Joseph F. Rached
15714 Gardenside Lane
Tampa FL 33624-1820

4a. Article Number **96-**

4b. Service Type

Registered Certified

Express Mail Insured

Return Receipt for Merchandise COD

7. Date of Delivery **7-26-96**

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)

X *Joseph Rached*

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

- ACK _____
- SEA _____
- APP _____
- CAF _____
- CMJ _____
- CTR _____
- EAG _____
- LET _____
- LI _____
- RF _____
- RO _____
- SEE 1 _____
- WAS _____
- OTH _____

DOCUMENT NUMBER-DATE

07894 JUL 27 96

FPS-C-RECORDS/REPORTING